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EDITORIAL COMMENT



THE CLOSING WEEK OF THE TUBERCULOSIS CONGRESS

Miss Dock's account of the nurses' session of the congress is given as the leading article in this JOURNAL. Following the week of the section meetings, the exhibit remained open until the evening of the 12th when, at 8.45 p.m. the Sixth International Congress on Tuberculosis was formally closed by brief addresses by Dr. John S. Fulton, the secretary-general of the congress, and Dr. Henry G. Beyer, chairman of the committee on exhibits. It was shown that this congress was by far the largest ever held. The paid up membership of the French congress, held three years ago, was 3200, while that of this congress is 6500. During the last week of the congress, a special educational crusade was carried on among school children and the employees of the different business houses of the city. Classes of school children, led by their teachers, were constantly seen marching to and from the building and groups of workmen were excused by their employers to inspect the exhibits and listen to short lectures prepared to meet their special needs.

CARE OF THE INCIPIENT PATIENT

From all that has been said and written on the subject of care of the early cases, we make the following suggestions as being the most practicable. These briefly stated are: that this work shall be carried on as a part of the regular service of the *already existing* general and city hospitals. In the light of our greater knowledge, special wards and tent additions for tuberculosis patients can be established and maintained without danger of infection of other classes of patients or of employees. The expense of administrative buildings and officers would thus be saved. The burden would be distributed throughout the states and country gen-

erally, and vastly greater numbers of people needing care could be gathered in for treatment during the curative period.

The prejudices of the common people against "consumptive hospitals" and "camps" have to be reckoned with. It is reasonable to expect that a patient will consent to go to a hospital in his own city, with which perhaps he is already familiar, and where his family may visit him, when he would refuse absolutely to go to a state institution at a distance or to a "consumptive hospital" in his own town, where to have been a patient practically brands him as unsafe.

With such a plan for the care of the incipient patients, all the powers of the city and state could be concentrated upon the segregation of the advanced cases for the protection of society, by gathering them into special hospitals, when humanely possible, or by placing them under the supervision of nurses maintained at public expense.

Education to be most effective must be directed toward the enlightenment of legislators, public officials, hospital managers, and the great rank and file of doctors and nurses. The inspiration of the Washington congress will be far reaching, but it will penetrate slowly the prejudiced minds of thousands of public officials who control the situation in their own locality, especially in the smaller centres. Public sentiment must not only be aroused but kept alive, and we know of no more influential factor in doing this than the well-informed private duty nurse.

THE NURSING SECTION PAPERS

The papers read on the special nurses' day at the congress will be printed in our pages, beginning in this issue, and during the coming months. We only regret that it does not seem expedient to give them all in one number. They will also be found in the official report of the Congress, copies of which may be obtained from Dr. Fulton at Washington. The price will be five dollars to those who were wise enough to pay for them in advance, but to those who did not it will be a good deal more, as it is found to occupy several large volumes.

THE WEST VIRGINIA STATE MEETING

THE editor was the guest, on the 14th of October, of the Graduate Nurses' Association of West Virginia, which held its third annual meeting at Fairmount. The journey from Washington directly west over the Blue Ridge and Allegheny Mountains was one of rare beauty, made doubly glorious by the tints of the autumn foliage. Fairmount is a little city of something less than 40,000 inhabitants, built on five hills,

on either side of the Monongahela River and is in close proximity to one of the greatest mining sections in the country.

Between sixty and seventy nurses gathered here from all over the state, and they were a very representative group of women. State registration was secured in West Virginia a year ago, and there was but little business to occupy the time. The papers were of a high order of excellence.

It will be remembered that the bill of the West Virginia nurses was vetoed by the governor after passing both houses of the Legislature because of the fact that women in that state are debarred from holding office, not being voters. During the session of the last Legislature an amendment to the constitution was carried through both houses and will at the coming elections be referred to the voters which will open the way for women to hold office. The governor referred the bill for state registration back to the Legislature and in place of the five nurses signified, "five persons" was substituted. The first board of examiners was composed of physicians, but if as a result of the referendum, the constitution of the state is changed, nurses may be appointed on the board without their bill having to be amended.

The last afternoon of the sessions was given over to the meeting of superintendents and head nurses of training schools. The problems in West Virginia are practically the same as those of the older nursing centres ten or fifteen years ago. The variety of experience for training in each hospital is limited, especially as so much of the work is in connection with the mines and largely surgical. The custom of sending nurses out to earn money for the hospital is almost universal. There is no limit to the amount of time a nurse shall spend outside of the hospital. The fact that nurses must hereafter be prepared for a state examination is beginning, however, to have a wholesome effect and there is a genuine awakening to the necessity for a more thorough and regular instruction on the part of all concerned.

The social features were a reception at the Cook Hospital on the first evening, when Mrs. Kendall, as superintendent of nurses, was the hostess of the evening, and a gathering at the miners' hospital on the second evening. Miss Vernon the hostess, where part of the time was given up to papers on tuberculosis. Miss Naomi Simmons presented a carefully prepared paper on "The Nurse's Place in Anti-tuberculosis Work." Dr. MacDonald, the superintendent of the hospital, who had attended the Tuberculosis Congress, made a most careful and interesting report of that convention, giving his own impressions and quoting extensively from the papers of the leading speakers. He made his address

especially interesting and valuable to the nurses by giving a description of the nurses' meeting and quoting from many of the papers read there.

A copy of Miss Dock's report, which appears in these pages and which the editor happened to have with her, was listened to with great interest by those present who had been most anxious to hear the result of the nurses' day.

The meetings ended with a trolley ride over to Clarksburg, all the way through mining country, where, unlike most mining regions, there is little external evidence of the work going on beneath the ground. The hills are unbroken, and the little villages of miners' cabins in the valleys are most picturesque as seen from the railroad.

The inspiration of the West Virginia association has come largely from Mrs. Lounsbury, who, as a former pupil and superintendent of the Homeopathic Hospital of Brooklyn, and the wife of a physician of Charleston, has been the leading spirit in the state work. To find so far from the great centres so enthusiastic a group of nurses, bent upon the elevation and advancement of their profession, is most inspiring.

A LAYMAN'S VIEW OF HOSPITAL WORK

UNDER this heading, Mr. J. Ross Robertson, of Toronto, Canada, gave some excellent advice at the recent meeting of the American Hospital Association. Most women who have been at the heads of hospitals and training schools for some years have had occasion to meet Mr. Robertson and will feel indebted to him afresh for his fair understanding of their difficulties. He said:

"My information and my experience point in the direction of small boards of management. Given a first-class superintendent, man or woman, to look after the work in the surgical and medical sides; a lady superintendent for the training school for nurses—if there be one—and a manager to cover the business end—all these under a small board of four or five trustees who are interested in the work, should suffice for the management of any hospital on this continent.

"There should be no interference by a lay board with the work of the medical staff, and likewise there should be no interference by the medical staff with the business management of the hospital. There is a proper way of adjusting difficulties, and so avoiding friction. Whatever is wrong can readily be righted when the entire facts are laid before the board or committee of management. Cases can be cited in Great Britain and on this continent where this clashing of interests has led

to disaster. Small boards and competent subordinates in management have worked out best in hospital work.

"There is no use for hospital managers being blown about by every wind of doctrine. Every special theorist must not be allowed to have his finger in the pie, exploiting his pet fads at the expense of the hospital.

"In all hospitals where there are training schools for nurses, the management of these schools is, as you all know, in the charge of a lady superintendent.

"It has often occurred to me that these women who hold such responsible positions do not get, in some cases, the cheerful consideration they should get from medical superintendents and boards of trustees.

"In fact, I know of cases in parts of this continent where, to use a familiar expression, the lady superintendent has "a hard time." I have had the pleasure of meeting the lady superintendents of the continent in the annual meetings of their association, and in very many of the hospitals in which they are engaged in their work of training and caring for the nurses of their schools. My opinion is that no class of women engaged in hospital work deserves more kindly treatment and encouragement than they do. The pathway of their work is not one strewn with roses and should be made as pleasant as possible by kind words and attention and consideration to the suggestions they have to make to better the condition of their pupils and to improve the routine of the daily labor that falls to their lot."

NATIONAL RESOURCES

WE have all been made aware, by uncomfortable personal experience, in whatever part of the country we may have spent the summer, that there has been a long period of drought, unprecedented in late years, accompanied by ruinous forest fires, in Canada, in our own northwest, and in the Adirondacks. All thinking persons will remember the warnings which they have heard again and again, of late years, that with the rapid cutting away of the forests both drought in the summer and floods in the spring are to be expected. The great use of the forests in conserving and regulating the water supply is that they act as a sponge, gathering and hoarding moisture, and letting it forth gradually as it is needed; but with no forests, the water is released in torrents at the time of melting snow in the spring, and there is drought later.

Another indirect but very interesting use of the forests is in conserving public health as is pointed out in a bulletin issued by the

Forestry Department, in which the deductions of Professor Irving Fisher are given. We quote in part:

"This subject of the economic value to the country of a general raising of the average health came up in the Governor's Conference at the White House in May. Dr. George M. Kober in his speech on the 'Conservation of Life and Health by Improved Water Supply' at the conference presented figures which showed that the decrease in the 'vital assets' of the country through typhoid fever in a single year is more than \$350,000,000. Typhoid is spread by polluted water largely so that the death-rate from this disease can be directly reduced by the purification of city drinking water. Dr. Kober quoted statistics to show that the increased value of the water to the city of Albany, where the typhoid fever rate was reduced from 104 in 100,000 to 26 by an efficient filtration plant, amounts to \$475,000 a year, of which \$350,000 may be considered a real increase to the vital assets of the city. Census Bureau figures show that the average annual death-rate from typhoid in cities with contaminated water supplies was reduced from 69.4 per 100,000 to 19.8 by the substitution of pure supplies.

"Dr. Kober cited estimates showing that the average length of human life in the sixteenth century was between 18 and 20 years, and that at the close of the eighteenth century it was a little more than 30, while to-day it is between 38 and 40—indeed, the span of life since 1880 has been lengthened about six years."

The control of our natural water supply would, of course, result in purer water, for there is more danger in low water with a feeble current than in a full stream with a good volume.

Every nurse should be interested in problems affecting the public health and she should be ready to do her part in the campaign by spreading such necessary knowledge among the people. When public apprehension is thoroughly aroused, there will be a better chance for forest preservation. Here are a few condensed facts from another forestry bulletin for the benefit of those who are almost unacquainted with this problem.

"In the last ten years," says the Yearbook of the Department of Agriculture for 1907, "forestry has advanced in this country from an almost unknown science to a useful growing profession. In that time the number of technically trained foresters has increased from less than a dozen to over 400. Ten years ago there was not a single forest school in the country; now there are several professional forest schools which rank with those of Europe, and a score more with courses in elementary forestry whose usefulness is steadily growing. The number of States

which have State forests has increased from 1 to 10, and of those which employ trained foresters from none to 11. The membership of forest associations has increased from 3600 to 15,000.

"And yet American forestry has only safely passed the experimental stage and got ready to do something. Action, immediate and vigorous, must be taken if the inevitable famine of wood supplies is to be lessened. We are now using as much wood in a single year as grows in three, with only twenty years' supply of virgin growth in sight. Only the application of forest knowledge with wisdom, method, and energy, in the next ten years, can prevent the starving of national industries for lack of wood.

"The wood lot offers an excellent opportunity for the practice of forestry. It is accessible enough to allow of moderate cuttings at frequent intervals, and it may be protected from trespass and grazing, and from fire, its chief enemy, without an elaborate scheme of defense; then taxation is not a great burden, because the revenue from farm supplies more than meets this item every year, and thus prevents the accumulation of interest. In New England, New York, and Pennsylvania great interest has been taken in planting white pine and other species."

THE NATURE OF SHOCK

DR. CHARLES H. LEMON, of Milwaukee, contributed to the *Yale Medical Journal* for June an article on this subject, illustrating not only the extensive and severe shock which we associate in our thoughts with the term, but the shock following intense fright. He illustrates it by the supposed case of a man in a railway accident who is without injury and who at first seems perfectly well, but after his return to his home, "the man is quiet, the exaltation of mind has disappeared, the pulse is rapid and he is overtaken by a feeling of fatigue. Reaction begins, he becomes conscious of pain in various parts of his body, he is nauseated, the extremities are cold though not bathed in perspiration; and if the accident has followed shortly the ingestion of a meal, he vomits. Six hours later there is a slight rise of temperature and the patient has a restless night. The following day the tongue is coated, there is headache, the face is flushed and may appear swollen, there is complete loss of appetite, there is pain in the small of the back, between the shoulder-blades, and at the base of the skull. The patient is irritable, he is anxious about his business affairs and almost without exception his bowels fail to move. The assurance of the previous day that he was not injured, gives place

to a despondent fear that he is seriously injured and that his condition will become progressively worse."

These symptoms are explained as due to the severe disturbance of the nervous system, causing circulatory disturbance and arrest of the normal secretions of the body, and the physician has a case of auto-intoxication to deal with. In the frequent cases of this kind which a nurse has to meet alone, she can act more intelligently in relieving the symptoms, if she bear in mind what the condition really is.

Dr. Lemon thinks more attention should be given to such states which are often treated slightly at first. Cases of serious depression and even of death have followed extreme mental disturbance even where there has been no accompanying injury.

CHOLERA

How many of us know anything definite about cholera? We think of it as a scourge of unclean countries, one that flees before civilization, but most of us have never seen a cholera patient and do not know, even vaguely, what the symptoms and treatment are.

The *British Journal of Nursing* for September 26 contained a very interesting article on this subject, quoted from the *British Medical Journal*, and written by Mr. R. W. Burkitt, F.R.C.I., a man who signs himself as coming from Lower Assam, and who has evidently had first hand dealings with cholera, so that he knows whereof he speaks.

Cholera begins with violent diarrhœa, accompanied by colic and cramps, and very quickly by vomiting. Through the vomiting and diarrhœa immense quantities of water are thrown off from the system, and great prostration comes rapidly. The vomiting and diarrhœa continue until there is utter collapse. Nothing can be retained by mouth or by rectum. Death comes rapidly, often in eight or ten hours from the onset of the disease; with children, it may occur in two hours.

Mr. Burkitt treats his patients with hypodermic injections of morphia, gr. $\frac{1}{4}$ to $\frac{1}{2}$, one dose being usually sufficient to give the needed rest. As soon as there is sufficient quiet he gives the patient enormous quantities of water to drink, to replace that lost, and this constitutes the whole treatment. If a patient is already in collapse when first seen it may be necessary to give an intravenous injection of salt solution. Since beginning this method of treatment, he has not lost one patient of those he has seen in the early stages, while the mortality of untreated cases is as high as 95 per cent.

THE NAVY NURSE CORPS

ESTHER VOORHEES HASSON, the newly appointed head of the Navy Nurse Corps, graduated ten years ago from the New Haven School for Nurses, and since that time has divided her time about equally between institution work and private duty. She was one of the first army nurses, serving on the hospital ship *Relief* during the Spanish-American War, and afterward in the Philippines. She has recently been one of the nurses at Panama.

She comes from a line of ancestors distinguished in the service of their country, two great-grandfathers having been in the colonial and revolutionary wars; her grandfather was in the army, her father was an army surgeon, and her brother is in the Revenue Marine Service. As a child she wished to be an army nurse, inspired by family tradition and by Miss Alcott's Hospital Sketches. Though naturally proud of her "fighting ancestors" she made no mention of them until after her appointment was secure, wishing to be judged wholly by her nursing methods.

Having proved herself equal to official responsibility in government service, and being used to the management of graduate nurses, there is no doubt that the choice is a happy one. The first nurses to be enrolled will number about twenty, two examinations having been held. The plan is "to expand the corps very gradually and make most careful selections of the nurses." Of those first appointed, Miss Hasson writes:

"The names of those already in the service together with the schools from which they were graduated are as follows:

"Elizabeth Leonhardt, Protestant Episcopal Training School, Philadelphia, Pa.; Clare L. Deceu, Buffalo General Hospital, Buffalo, New York; Ada M. Pendleton, Garfield Memorial Hospital, Washington, D. C.; Elizabeth J. Wells, Garfield Memorial Hospital, Washington, D. C.; Mary H. DuBose, Lane Hospital, San Francisco, Cal.; M. Estelle Hine, ex-army nurse, Northwestern Hospital, Minneapolis, Minn.; Sara M. Cox, ex-army and Spanish War nurse, Boston City Hospital, Boston, Mass.; Florence T. Milburn, Children's Hospital, Boston, Mass., with training at the Massachusetts General and post-graduate training in the Corey Hill Hospital, Boston, Mass.; Mrs. J. H. Higbee, Post-Graduate Training School, New York City, and Bellevue and Allied Hospitals, New York City; J. Beatrice Bowman, Medico-Chirurgical Hospital, Philadelphia, Pa.; Della V. Knight, ex-army nurse, German Hospital, Brooklyn, N. Y.; T. B. Small, Johns Hopkins Hospital, Baltimore, Md.; Elizabeth Hewitt, Spanish War nurse, Columbia and Children's Hospital, Washington, D. C.

"The first two to receive appointment as head nurses will be, Martha E. Pringle, Protestant Hospital, St. Louis, Mo., eight years in the Nurse Corps of the U. S. Army as nurse and head nurse, and Victoria White, St. Luke's Hospital, South Bethlehem, Pa.

"Miss White has for seventeen years occupied the position of superintendent at the above hospital, Miss Deceu and Mrs. Milburn have also occupied positions as the heads of hospitals and training schools, as have possibly others in the corps. Miss Hewitt was for two years assistant at the Children's Hospital in Washington."

ANOTHER INTERESTING APPOINTMENT

Miss M. Eugenie Hibbard, whose name is closely associated with nursing in Cuba, has received the appointment of Inspectress General of Nurses of the Island of Cuba. This position has just been created, being provided for in the budget which received official recognition during July. Just before sailing for Cuba on October 3, Miss Hibbard wrote a little sketch of the new office.

"The obligations of this duty are to serve in the office of the Department of Charities and to be responsible for all that pertains in relation to the schools for nurses of which there are seven in the island—two in the Capital (Havana), one special in Mazarra, one in each of the following provinces: Matanzas, Cienfuegos, Camaguey, and Santiago de Cuba; at the convenience and under orders of the Department to make inspections or investigations of whatever hospitals employ the services of graduated nurses; to keep a complete register of all nurses, whether student or graduate nurses, and of everything which relates to nurses or nursing."

Miss Hibbard's name is familiar to many JOURNAL readers, as a Spanish-American nurse, as having accompanied the hospital ship *Maine* to South Africa, an account of which she wrote for the first numbers of our magazine, as superintendent of a hospital in Havana, and later at Panama.

Both Miss Hibbard and Miss Hasson seem to have been unconsciously preparing themselves for their present responsible positions.

